



Grantees interested in participating in training workshops and follow-up onsite help may contact Audrey Smolkin (asmolkin@hrsa.gov) for referrals and further information.

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DISEASE MANAGEMENT

Dr. Jack Epstein, family physician and champion of Disease Management protocols, spoke to CAP grantees on April 10, 2001 about the theory and potential benefits of developing and implementing Disease Management systems. The Disease Management model offers quality improvement for health care centers by creating better health outcomes through delivery of the full standard of care for patients at risk for specific diseases. Disease Management as a model of care came about after an extensive study of well-insured patients' claims data revealed that the standard of care recommended for many specific chronic diseases is followed much less than half the time. Clearly, a comprehensive new approach is needed, one that operates on all levels and is cost-effective as well.

Disease Management targets patients who risk increased morbidity and mortality due to diseases that respond well not only to the clinician's care but to intelligent self-care. It is a system that incorporates the provider and the patient, working together to modify the disease. Reducing chances of admission to the hospital and increasing patient compliance and understanding, Disease Management is the leading edge technique for quality health care.

Surveys of conditions causing death in this country have shown that disparities by race and ethnicity are common. Conditions such as coronary heart disease and strokes cause death more often in underserved populations. Community health centers are finding that Disease Management concepts can be utilized to improve health outcomes and to empower the community.

Disease Management is driven by:

- ◆ Health-care quality improvement
- ◆ Managed-care influences
- ◆ Patient-centered care

Health-Care Quality Improvement

Adherence to standards of care and a commitment to self-care education result in marked improvements in health outcomes in the Disease Management model. Agreement between administrative and clinical personnel on the subjects of management and measurements is crucial, as is the continued involvement of both in the operation of the system. As experience in Disease Management is gained and information is shared, demonstrated improvement in health outcomes is resulting in widespread acceptance of the model.

Information systems are key elements of Disease Management's success, whether simple, like a checklist, or high-tech, like proprietary software systems. Our data-rich environment is a necessary support tool for clinical practice improvement as well as a way to gauge performance patterns over time. In the Disease Management system, regularly reviewing and assessing data on each patient forms the basis for the successful clinical outcomes of the program.

Managed Care Influences

Medicaid and other third party contracts with managed care organizations have resulted in the widespread adoption of Disease Management protocols. Managed care organizations have provided a framework to build on and evidence of health outcome improvements spurs further development of these systems. In cases involving complex or rare therapies, specialists continue to be utilized in the continuum of care.

Patient-Centered Care

Disease Management, as a prevention-based initiative, revolves around the patient. Actively involving the patient in his own care, enhancing self-management, has been proven to reduce the incidence of hospital admissions and emergency room visits in the majority of cases. The advances of technology are helping patients become more self-reliant, and at a lower cost than ever before. Cost-effectiveness is an important issue. Often budgets require rearrangement as a decrease in utilization in one area, such as emergency room visits, usually means an increase in another, such as health center visits.

CAP grantees can benefit from utilizing disease managers who work with one or all diseases, clinical outreach workers who visit patients at home, and patient educators, all of whom work with patients, increasing understanding and disease-modification techniques.

Starting a Disease Management Program

Critical action steps to consider when developing a Disease Management program include:

- ◆ Implementing a Disease Management program with the visible support of both Administrative and Clinical Directors.
- ◆ Enlisting a cross-section of staff to select specific diseases (target the chronic, high-cost, high volume diseases that are a clinical priority), develop guidelines, determine responsibility, and set up a method of communication so that positive results can be seen and shared.
- ◆ Measuring progress clearly, keeping staff focused and energized, and carefully tracking individual patient performance.
- ◆ Measuring status at pre-determined intervals. This step is critical and must not be neglected.
- ◆ Exchanging information and reviewing data regularly among clinicians. Neglecting this important step may result in a Disease Management system with results no better than those of traditional management systems.

Experience has clearly demonstrated that Disease Management can improve quality of care, cost-effectiveness and program marketability. As a viable and innovative model of health care, Disease Management has much to offer CAP grantees.

Dr Epstein has provided the following list of informative articles on the subject of Disease Management:

Physician's Practice Digest Disease Management Overview

www.ppdnet.com/content/issues/mayjune00/cover.htm

Partnership AmDiabetesAssn and PacifiCare

www.aishealth.com/ManagedCare/MgdCareAdvisor/PacificareJoins.html

Physician perspective

www.managedcaremag.com/archives/0001/0001.dmpac.doc_op.html

Disease Management Association of America - trade group

www.dmaa.org/

Kaiser Permanente Asthma

www.kaiserpermanente.org/medicine/permjournal/spring00pj/frasthma.html

Open Gates RN/Community Health Worker HBP Program

http://apha.confex.com/apha/128am/techprogram/paper_16508.htm

HBP using EMR Logician (animation requires separate viewer)

www.logicianusers.com/Chicago2k/Erst/

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